## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

**Application or Docket Number** 

666213

		CLAIMS AS	olumn 1)	SMALL I	ENTITY	OR	OTHER SMALL			
FO	R	NUMBE	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BA	SIC FEE					RATE	345.00	OR		690.00
то	TAL CLAIMS	不	3 minus 2			X\$ 9=		OR	X\$18=	95400
IND	EPENDENT CL	AIMS	minus 3	3 = 1 8		X39=		OR	X78=	624°°
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT	+130=		OR	+260=			
* If	the difference	in column 1 is	ess than ze	TOTAL		OR	TOTAL	2268°°		
	CI	LAIMS AS A	MENDED	:			OTHER			
(Column 1) (Column 2) (C						SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	4400	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	-Total-		Minus	**	=:	X\$ 9=		OR	X\$18=	American Partie American A American American American American A American A American American American A American American American A A A American A A A A A A A A A
	Independent	NITATION OF MI	Minus	PENDENT CLAIM	=	X39=		OR	X78=	
	TINOTTRESE	INTATION OF IM	JETT EE DEF	ENDENT OPAIN		+130=		OR	+260=	
			•	;		TOTAL ADDIT. FEE		OR	TOTAL ADĎIT. FEE	3 <sup>74</sup>
(Column 1) (Column 2) (Column 3)										,
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	. 9	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=	-	OR	X\$18=	, I
	Independent	•	Minus	***	=	X39=		OR	X78=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					. 100			.000	
						+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
Ľ.		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)					
AMENDMENT C		REMAINING AFTER AMENDMENT	anning and	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	=	X\$ 9=		OR	X\$18=	
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-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	+260=	
				mn 2, write "0" in co		+130= TOTAL			TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 666213

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<u>TOTAL FEE CALCULA</u> Ford due upon filing th						
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BALANCE DUE	= s <u>2398</u>	Go .				
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